

## DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814  
(916) 322-5462



November 21, 1984

ALL-COUNTY LETTER NO. 84-117

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: AID TO FAMILIES WITH DEPENDENT CHILDREN STATISTICAL REPORTING

REFERENCE: DIVISION 26-219

This letter transmits a revision of the AFDC - Family Groups and Unemployed Report on Denials and Other Nonapprovals of Applications for Cash Grant Report (ABCD 255) and the corresponding reporting instructions (Division 26-219). The form has been revised to be consistent with EAS Manual Section 40-171.221c which states that applications disposed of because the applicant moved or the county is unable to locate the recipient should be reported as an application disposed of by reason of denial. In accordance with this regulation the item "unable to locate or moved", previously reported as Item 10 under "Reasons for Nonapprovals Other Than Denials", has been changed to Item 8 on the new form and placed under "Reasons for Denials of Cash Grant". Additionally, it will no longer be necessary to footnote information on denials of applications for State-only AFDC-U due to exhaustion of eligibility. This footnote has been incorporated into the form as a new Item 9.

Counties should begin reporting on the new revised form for the report quarter of December 1984. A supply of the forms will be available from the Department of Social Services Warehouse and may be ordered in the usual manner. Attached is a copy of the revised form and reporting instructions which may be photocopied and used for reporting purposes as necessary.

If you have any questions concerning this All-County Letter, please contact Winnie Barber, Statistical Services Branch, at (916) 323-6156 or (ATSS) 473-6156.

A handwritten signature in cursive script, reading "Robert T. Sertich".

ROBERT T. SERTICH  
Deputy Director  
Administration

Atch

cc: CWDA

STATISTICAL REPORT  
REPORTS - PUBLIC ASSISTANCE

26-219 AFDC - FAMILY GROUPS AND UNEMPLOYED REPORT ON DENIALS  
AND OTHER NONAPPROVALS OF APPLICATIONS FOR CASH GRANT  
(FORM ABCD 255)

26-219

26-219.01 CONTENT

26-219.01

This report provides quarterly data on applications and requests for restoration for the AFDC-FG and AFDC-U programs which have been denied or otherwise disposed of without approval, classified by primary reason for action.

26-219.02 PURPOSE

26-219.02

The purpose of this report is to provide data for analysis of the reasons for denial or other nonapproval or requests for aid. The data will be used in the preparation of estimates concerning the implications of changes in eligibility requirements and in evaluation of eligibility requirements now in effect.

26-219.03 DISTRIBUTION

26-219.03

Information on the reasons for denial or other nonapproval of applications for money payments is required to meet the reporting requirements of the U.S. Department of Health and Human Services.

26-219.04 DUE DATE

26-219.04

Reports are to be received in Sacramento not later than the 12th working day of the calendar month following the report month following the end of each calendar quarter: March, June, September, and December. Mail to:

Department of Social Services  
Statistical Services Branch  
744 P Street, Mail Station 12-81  
Sacramento, California 95814

26-219.06 DEFINITIONS

26-219.06

An application for aid (cash grant) which is not approved may be disposed of by (1) denial, or (2) other nonapproval. A finding that an applicant is ineligible to receive a cash grant results in a denial. Also, by regulations, the application of an applicant (1) whose whereabouts are unknown or (2) who has established residence in another state is denied. Removal of the applicant to another county in this state is not a cause or reason for denial; the county receiving the application completes the determination of eligibility and, if appropriate, initiates inter-county transfer procedures. Referral of an applicant to another program or agency is not, in itself, a reason for denial of an application for cash grant.

26-219.10 GENERAL INSTRUCTIONS

26-219.10

When an application for cash grant is denied or otherwise disposed of without approval (withdrawal or cancellation), the reason for the action will be reported on Form ABCD 255. One form is to be submitted for each quarter: March, June, September, and December. Only one reason for each application not approved may be reported; it must be chosen from those set forth in the following sections and appearing on the form. If more than one reason is applicable, the reason that is considered most important by the caseworker is to be used. Reasons for

denial of AFDC applications have been categorized, and grouped accordingly, to correspond with the specific reason for denial classifications required for federal reporting and are part of these instructions (see Denial Reason Code Classification List: 26-219.90).

## 26-219.20 PART A. REASONS FOR DENIALS OF CASH GRANT

26-219.20

Total denials of cash grant - Enter the number of applications denied aid during the quarter due to ineligibility for a cash grant. Individual denials are to be classified according to the reason included in the written notification to the applicant that the application has been denied. This item will be the sum of Items 1 through 9. Also, Items 1 through 9 must equal the quarterly total of the figures reported in Item 4b on Form CA 237 FG/U.

1. No eligible child - Enter in this item the number of denials that resulted from a determination that the applicant has no child who met the specific conditions of eligibility for AFDC. Include the following applicable reason codes as indicated on the Denial Reason Code Classification List: Codes 10, 13, 15, 16, 29.
2. Not deprived of support or care - Enter in this item the number of denials that resulted from a determination that the child(ren) for whom the application for a cash grant was made was not deprived of parental support or care. Include the following applicable reason codes as indicated on the Denial Reason Code Classification List: Codes 14, 17 (AFDC-U only).
3. Resources exceed limits - Enter in this item the number of denials with a determination made that the applicant had resources in excess of limits permitted for AFDC eligibility: Code 02.
4. Income exceeds standards - Enter in this item the number of denials that resulted from a determination that the applicant had income in excess of limits permitted for AFDC eligibility: Code 01.
5. Failure to comply with procedural requirements - Enter in this item the number of denials that resulted from the failure of a member of the applicant group to comply with procedural requirement specified for AFDC eligibility. Include the following applicable reason codes as indicated in the Denial Reason Code Classification List: Codes 31, 32, 33, 34, 35, 39.
6. Undocumented alien - Enter in this item the number of denials that resulted from a determination that the applicant did not meet the citizenship requirements for AFDC eligibility: Code 19.
7. Nonresident - Enter in this item the number of denials that resulted from a determination that the applicant did not meet the residence requirements for AFDC eligibility: Code 18.
8. Unable to locate or moved - Enter in this item the number of applications denied because the agency was unable to locate the applicant, the applicant moved to another jurisdiction or state. Include the following applicable reason codes as indicated on the Denial Reason Code Classification List: Codes 40, 41.

9. State-only AFDC-U eligibility exhausted - Enter in this item the number of applications for State-only AFDC-U denied because eligibility for the State-only AFDC-U program has expired: Code 50.
10. To be used only on instructions from the Department of Social Services:  
 a. Code 51  
 b. Code 52

## 26-219.30 PART B. REASONS FOR NONAPPROVALS OTHER THAN DENIALS

26-219.30

Enter the number of nonapprovals other than denials. Item 11 must equal the quarterly total of the figures reported in Item 4c on Form CA 237 FG/U.

11. Application withdrawn - Enter in this item the number of applications disposed of due to the withdrawal of the application. Include the following applicable reason codes as indicated on the Denial Reason Code Classification List:  
 Code 42, 43.

26-219.90

DENIAL REASON CODE CLASSIFICATION LIST  
 FOR FORM ABCD 255

26-219.90

## 1. No eligible child

Code	Reason for Denial
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- |    |   |
|----|---|
| 10 | Age   |
| 13 | Living in a public nonmedical institution               |
| 15 | Child not living with relative of required relationship |
| 16 | Child not enrolled in school (18 year olds only)        |
| 29 | Other (do not use if applicable reason is listed above) |

## 2. Not deprived of support or care

Code	Reason for Denial
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- |    |  |
|----|--|
| 14 | Child not deprived of parental support or care |
| 17 | Parent not unemployed (AFDC-U only)            |

## 3. Resources exceed limits

Code	Reason for Denial
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- |    |   |
|----|---|
| 02 | Other resources exceed allowable limits |
|----|---|

## 4. Income exceeds standards

Code	Reason for Denial
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- |    |                               |
|----|-------------------------------|
| 01 | Income exceeds allowable need |
|----|-------------------------------|

## 5. Failure to comply with procedural requirements

Code	Reason for Denial
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31	Relatives' responsibility provision
32	Refused to register for and to seek work
33	Refused suitable work, referred by Employment Development Department
34	Refused suitable work, other source of employment
35	Refused to accept training or education
39	Other refusal to comply with requirements

## 6. Undocumented alien

Code	Reason for Denial
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19	Ineligible because of alien status
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## 7. Nonresident

Code	Reason for Denial
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18	Does not meet residence requirements
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## 8. Unable to locate or moved

Code	Reason for Denial
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40	Unable to locate
41	Established residence in another state

## 9. State-only AFDC-U eligibility exhausted

Code	Reason for Denial
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50	Ineligible for State-only AFDC-U because eligibility is exhausted
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## 10. To be used only on instructions from the Department of Social Services

Code
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51
52

## Reason for Nonapprovals Other Than Denials

## 11. Application withdrawn

Code	Reason for Nonapproval
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42	Death of applicant or dependent child
43	Withdrawal of application by applicant

# AFDC — FAMILY GROUPS AND UNEMPLOYED REPORT ON DENIALS AND OTHER NONAPPROVALS OF APPLICATIONS FOR CASH GRANT

Send one copy to:

DEPARTMENT OF SOCIAL SERVICES  
STATISTICAL SERVICES BRANCH  
744 P STREET, MAIL STATION 12—81  
SACRAMENTO, CALIFORNIA 95814

ITEM	AFDC	
	FG	U
<div> <div>COUNTY CODE</div> <div>COUNTY NAME</div> </div> <div>FOR QUARTER ENDING (MONTH, DAY, YEAR)</div>		
<b>PART A. REASONS FOR DENIALS OF CASH GRANT</b>		
Total denials of cash grant .....		
1. No eligible child .....		
2. Not deprived of support or care .....		
3. Resource exceeds limits .....		
4. Income exceeds standards .....		
5. Failure to comply with procedural requirements .....		
6. Undocumented alien .....		
7. Nonresident .....		
8. Unable to locate or moved .....		
9. State-only AFDC-U eligibility exhausted .....		STATE-ONLY AFDC-U
10. To be used only on instructions from the Department of Social Services:		
a. _____		
b. _____		
c. _____		
<b>PART B. REASONS FOR NONAPPROVALS OTHER THAN DENIALS</b>		
11. Application withdrawn .....		
<div>PERSON TO CONTACT REGARDING THIS REPORT</div> <div>TELEPHONE</div> <div>DATE PREPARED</div>		